

Exhibit 2



Deposition of:
Kara Corrado

September 10, 2019

In the Matter of:

**Russell, Monique Vs. Educational
Commission For Foreign Medical
Graduates**

Veritext Legal Solutions

1 IN THE UNITED STATES DISTRICT COURT
2 FOR THE EASTERN DISTRICT OF PENNSYLVANIA

3 - - -

4 MONIQUE RUSSELL, JASMINE : Case No.
5 RIGGINS, ELSA M. POWELL :
6 AND DESIRE EVANS, : 2:18-cv-05629-JW

7 Plaintiffs, :

8 vs. : Hon. Joshua D. Wolson

9 EDUCATIONAL COMMISSION :
10 FOR FOREIGN MEDICAL :
11 GRADUATES, :
12 :

13 Defendant. :

14 - - -

15 September 10, 2019

16 - - -

17 Oral deposition of KARA CORRADO, taken
18 at the offices of MORGAN LEWIS BOCKUS, LLP,
19 1701 Market Street, Philadelphia, Pennsylvania
20 beginning at 10:48 a.m., before
21 Jennifer L. McDonald, a Professional Reporter
22 and a Notary Public in and for the Commonwealth
23 of Pennsylvania.

24 - - -

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1 special investigations and the addition
2 of case managers, it fell under the
3 purview of the associate vice president,
4 who was Bill Kelly, and I, at the time, a
5 manager of operations program
6 development.

7 So Bill, myself, and Virginia
8 Kesting, who reported to me, we were the
9 folks working on the irregular behavior.
10 So in that respect when I was working for
11 Bill, I was staff.

12 BY MR. THRONSON:

13 Q. When did you get involved in
14 work on irregular behavior matters?

15 A. That was around 2008 when I
16 moved -- changed position.

17 Q. So the staff for the irregular
18 behavior is part of the special investigations
19 team?

20 A. That is the special
21 investigations team now, yes.

22 Q. Okay. Got it. How does ECFMG
23 serve the public?

24 MS. McENROE: Objection to form.

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1 THE WITNESS: ECFMG serves the
2 public in a number of ways. Our original
3 program which was the certification
4 program severs the public in ensuring
5 that those physicians that are educated
6 outside of the U.S. and Canada meet
7 certain minimum requirements in order to
8 enter an accredited residency program in
9 the United States.

10 We also serve the public in
11 facilitating an appropriate review of
12 them, at the same time making sure that
13 we are efficient about doing it, because
14 IMGs -- or International Medical
15 Graduates represent about 25 percent of
16 the physicians that are working in the
17 United States.

18 So it's important from a
19 physician-workforce point of view to make
20 sure we have qualified physicians. So in
21 those two broad ways I would say that we
22 serve the public.

23 BY MR. THRONSON:

24 Q. How does ECFMG serve medical

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1 residency programs?

2 MS. McENROE: Objection to form.

3 THE WITNESS: So ECFMG has a
4 certification program that is required
5 for entrance into ACGME accredited
6 residency programs.

7 BY MR. THRONSON:

8 Q. Any other ways in which ECFMG
9 severs medical residency programs?

10 MS. McENROE: Objection to form.

11 THE WITNESS: So we also have an
12 exchange visitor sponsorship program. We
13 are responsible for physicians who are
14 seeking residency and training in the
15 United States on a J-1 nonimmigrancy
16 step.

17 BY MR. THRONSON:

18 Q. Beyond the ways in which you
19 serve medical residency programs that you
20 described, how else does ECFMG serve hospitals?

21 MS. McENROE: Objection to form.

22 THE WITNESS: I don't know that
23 I would say that we serve hospitals,
24 however, we do provide a service for

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1 obligated to exercise reasonable care in
2 performing those services?

3 MS. McENROE: Objection to form;
4 calls for legal conclusion as does this
5 whole line of questioning.

6 THE WITNESS: So ECFMG has a set
7 of policies and procedures that it
8 enforces when it is processing applicants
9 or certifying them.

10 BY MR. THRONSON:

11 Q. Okay. Is following -- does
12 ECFMG have the obligation to follow those
13 policies and procedures?

14 MS. McENROE: Objection to form;
15 also calls for legal conclusion.

16 THE WITNESS: I mean ECFMG, I
17 think, like any organization will follow
18 it's policies and procedures and the
19 staff will follow the policies and
20 procedures, and in the course of their
21 normal work will be working to make sure
22 they are appropriately following those
23 policies and procedures.

24 BY MR. THRONSON:

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1 Q. Can you tell me about the
2 various categories of policies and procedures
3 that have applied perhaps at different times
4 from 1996 to the present with respect to ECFMG
5 certification of IMGs?

6 MS. McENROE: Objection to form;
7 calls for a narrative.

8 You can answer if you can.

9 THE WITNESS: So there are
10 myriad policies and procedures that would
11 apply to ECFMG certification. Is there a
12 specific one or type of policy that you
13 are interested in?

14 BY MR. THRONSON:

15 Q. What I'm thinking of, is there a
16 set of policies on irregular behavior called
17 irregular behavior policies; is there a set of
18 policies called how to perform primary-source
19 verification of the diploma?

20 Just sort of broad categories of
21 policies or names of sets of policies?

22 MS. McENROE: Objection to form.

23 THE WITNESS: So ECFMG has
24 irregular behavior policies and

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1 procedures, and we also have an
2 information booklet that's updated yearly
3 that contains all of the policies related
4 to ECFMG certification; eligibility for
5 certification, eligibility for
6 examinations, and those types of
7 policies.

8 BY MR. THRONSON:

9 Q. How about -- strike that. Has
10 it had irregular behavior policies continuously
11 from 1996 to the present?

12 A. Yes, that's my understanding.

13 Q. Are there any internal irregular
14 behavior polices that are not necessarily
15 published on a website or in a booklet for the
16 benefit of IMGs?

17 So basically internal procedures
18 that govern the operation of ECFMG with respect
19 to irregular behavior?

20 MS. McENROE: Objection to form.

21 THE WITNESS: So there are
22 policies that are published on the
23 website, but there are also procedures
24 that staff would follow in terms of

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1 preparing cases for the committee and
2 sending letters out and things like that
3 that are not necessarily published.

4 BY MR. THRONSON:

5 Q. One of the things that we've
6 been seeking in this case is just to get all
7 the relevant sets of policies and procedures,
8 and we have gotten some, but I'm trying to get
9 a sense of the universe of documents that might
10 be relevant to this case just so we have a full
11 picture of what ECFMG policies are.

12 So if we were to, say, request
13 policies from the organization obviously one set
14 of policies that we would request would be --
15 actually have some meaning, would be a request
16 for the irregular behavior policies and
17 procedures, right?

18 MS. McENROE: Objection to form.

19 THE WITNESS: (Nonverbal
20 response.)

21 BY MR. THRONSON:

22 Q. Is there another set of policies
23 called -- that governs when to refer cases to
24 the credentialing committee?

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1 of.

2 BY MR. THRONSON:

3 Q. So Mr. Kelly, in drafting this
4 document, never indicated to you that this is
5 something new that I'm putting in here, I think
6 we should change how we're doing a particular
7 thing?

8 MS. McENROE: Objection to form.

9 THE WITNESS: Not that I recall.

10 BY MR. THRONSON:

11 Q. According to these procedures
12 when should an allegation of irregular behavior
13 be referred to the credentials committee?

14 MS. McENROE: Objection to form.

15 BY MR. THRONSON:

16 Q. By these procedures I mean the
17 ones in Exhibit 2.

18 A. There is, on page 4, an
19 indication to send the allegation of irregular
20 behavior which in quotes we call "the charge
21 letter to the applicant."

22 Q. Can you show me the language you
23 are referring to; read it for me?

24 A. The bottom of page 4. The very

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1 last two italicized phrases.

2 Q. I see that. So I'm interested
3 in knowing when staff becomes aware of an
4 allegation of irregular behavior, is there
5 anything in Exhibit 2 that indicates when staff
6 should refer that allegation to the credentials
7 committee?

8 MS. McENROE: Objection to form.
9 BY MR. THRONSON:

10 Q. Or under what circumstances the
11 staff should refer to the --

12 A. The document -- the procedures
13 are documenting walking through the process of
14 the investigation which starts with determining
15 whether the irregular behavior relates to
16 ECFMG, whether the source of the allegation is
17 credible, and the process you go through when
18 this comes to the source of the allegation.

19 Q. Is it ECFMG's position that if
20 staff determines an allegation is credible,
21 that that allegation should be forwarded to the
22 credentials committee?

23 MS. McENROE: Objection to form.

24 THE WITNESS: So the policies

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1 and procedures on irregular behavior
2 indicate that if staff determines there
3 is sufficient evidence of irregular
4 behavior the matter will be referred to
5 the credentials committee.

6 BY MR. THRONSON:

7 Q. Is that language in this
8 procedure; is it written down somewhere else?

9 A. So that language without sitting
10 and reading through here, I don't know for sure
11 if it's in this document or not; but it is in
12 the medical education credentials committee
13 policies and procedures on irregular behavior.

14 Q. Okay. Can you say that for me
15 again, if staff determines that there is
16 sufficient evidence; is that what you said?

17 A. That is what I said, yes.

18 Q. What is sufficient evidence?

19 A. Sufficient evidence, it depends
20 on the case. For example, if it's a falsified
21 credential and the school responded and said
22 the diploma is false, then that response would
23 be sufficient evidence to make an allegation of
24 irregular behavior on a falsified credential.

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1 Q. Okay. I'd like to walk through
2 some -- strike that. Has it been ECFMG's
3 procedure since 1996 that if staff determines
4 that an allegation is supported by sufficient
5 evidence that the allegation is referred to the
6 credentials committee?

7 A. That is my understanding, yes.

8 Q. Does the evidence have to be in
9 a particular form? For example, does there
10 have to be a particular kind of documentary
11 evidence, or does that depend on the case?

12 A. It depends on the case.

13 Q. On page 6 of the policies and
14 procedures, this is Bates 10203, the procedure
15 reads "if the third party is not already
16 provided the appropriate identifying
17 information about the individual" -- so on and
18 so forth -- "ECFMG staff must determine whether
19 the individual is an applicant to ECFMG for any
20 program or service such as ECFMG certification,
21 EPIC, et cetera. To do this staff must use all
22 the appropriate search functions to query all
23 ECFMG databases," and it mentions AMES, OASIS,
24 and EPIC as examples of those databases.

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1 went to medical school beyond that ECFMG
2 received these two diplomas that were source
3 verified by the institution?

4 A. Yes, that's correct.

5 Q. Does ECFMG have any information
6 apart from the source verification of those
7 diplomas that would indicate where this
8 individual actually went to medical school, if
9 anywhere?

10 A. All of the information we have
11 about his medical education, aside from the
12 verification of the diploma by the medical
13 school's officials, would have been provided by
14 him on his applications to ECFMG.

15 Q. So just to be totally clear,
16 apart from having these two diplomas that were
17 source verified by the institution and ECFMG's
18 belief, ECFMG can't say where and when this
19 individual, Akoda Igberase, went to medical
20 school, if anywhere?

21 MS. McENROE: Objection to form.

22 THE WITNESS: We could only
23 provide the information that the school
24 verified to us, which would include the

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1 graduation date on the diploma.

2 BY MR. THRONSON:

3 Q. How did you obtain source
4 verification from the school?

5 A. For those diplomas?

6 Q. For those diplomas.

7 A. We followed our processes at the
8 time for source verification which was to send
9 a copy of the diploma to the medical school
10 directly with a form for the school official to
11 complete, it's a safety paper form, and a
12 prepaid envelope, -- I'm sorry, it's not a
13 prepaid envelope, but an envelope addressed to
14 ECFMG to be returned to us.

15 Q. At this time, did you also
16 request, we're talking about between 1992 to
17 2000, did you also request verification of
18 whether an individual was registered as a
19 medical practitioner or licensed to practice
20 medicine in his or her home country?

21 A. The credentialing requirements
22 for certification at that time included source
23 verification of the diploma only, and the
24 individual was required to also submit a copy

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1 of their certificate of their full registration
2 or license, but those were not source-verified.

3 Q. Why not?

4 A. I don't know why they were not,
5 but the decision prior to me had been source
6 verification of diploma with a submission of
7 the license, which is not a requirement now.

8 Q. Why did it cease becoming a
9 requirement?

10 A. We introduced a clinical skills
11 assessment examination in 1998, and at that
12 time the organization determined it did not
13 need the license or certificate of registration
14 from an international medical graduate when it
15 introduced a clinic skill assessment which is
16 an in-person exam simulated with patients.

17 Q. It has never been a requirement
18 for international medical graduates applying
19 for ECFMG certification to provide government
20 issued photoed identification, correct?

21 A. It is a requirement to submit
22 photo identification currently, but it was not
23 in the past.

24 Q. When did it become a

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1 requirement?

2 A. It varies based on the service.
3 So the international credential services, EPIC,
4 when that program was launched, which I believe
5 was I was in 2012 or 2013, part of the
6 requirement was to submit a copy of the
7 passport and have it notarized -- an
8 identification form notarized and for ECFMG
9 certification that became part of the
10 requirement in 2017, I believe, or 2018; maybe
11 2018, more recently.

12 Q. Why did it become a requirement?

13 A. We were looking across our
14 processes and programs and we wanted to
15 standardize it, work towards standardization,
16 and bring, like have a notary -- the process is
17 essentially the same as it had been but we
18 wanted to tighten it up in terms of having one
19 notary that we contract with to provide
20 notarization of the identification forms to us.

21 Q. Is that a separate requirement,
22 in terms of ECFMG now has a requirement that an
23 applicant provide government issued photo
24 identification if I'm understanding you right?

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1 security number to ECFMG itself, correct?

2 A. It would depend on whether -- I
3 mean we would have known, yeah. I think we put
4 that in the letter to them, we got the social
5 security number. So if -- if we knew because
6 they advised us that he had used the other
7 social security number that that was not his
8 social security number, yes.

9 Q. If you turn to Exhibit 31, this
10 is the letter we were talking about earlier.
11 Exhibit 31 to the Kelly deposition from Steve
12 Seeling to James McCorkle. In the second
13 paragraph Steve Seeling states the social
14 security number he provided ECFMG in 1998 is
15 9065?

16 A. Yes, I see that.

17 Q. Providing a false social
18 security number or using a false social
19 security number can be a federal, criminal
20 offense; correct?

21 MS. McENROE: Objection to form;
22 calls for a legal conclusion.

23 THE WITNESS: That's my
24 understanding, yes.

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1 BY MR. THRONSON:

2 Q. At least based on the plea
3 agreement and so fourth --

4 A. Yes.

5 Q. Right, and it was also one of
6 the reasons that Akoda was ultimately kicked
7 out of the Jersey Shore residency, right?

8 A. Yes.

9 Q. Under ECFMG's judgement would
10 providing a false social security number to
11 ECFMG at that time have constituted irregular
12 behavior?

13 A. I think it would depend on the
14 circumstances around how the information was
15 provided and what evidence we had of that.

16 Q. Do you have a sense of what,
17 after ECFMG became aware that -- well, let me
18 back up. You said it would depend on the
19 circumstances. So under the circumstances of
20 this case, is it ECFMG's position that Akoda
21 providing a false social security number to
22 ECFMG in 1998 constituted irregular behavior?

23 MS. McENROE: Objection to form.

24 THE WITNESS: What I know is

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1 that it constituted the allegation from
2 the residency program; constituted enough
3 information for us to do an investigation
4 on that, but we did not have sufficient
5 evidence of the irregular behavior to
6 charge him with irregular behavior.

7 So there would be a policy tie
8 to the provision of false information.
9 For example, I don't know where anybody
10 lives, you could put an address on the
11 application that is not really your
12 address. You might be using someone
13 else's address that you know. I don't
14 know that that necessarily constitutes
15 irregular.

16 So if I have evidence of -- if
17 someone wrote a social security number on
18 the application and maybe the number is
19 off, I don't have any way to verify
20 whether the social security is valid or
21 not.

22 So if you were providing a false
23 number to us, in addition to other pieces
24 of information, that would show that you

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1 were trying to subvert our processes like
2 Dr. Igberase did in using different
3 pieces of information in order to subvert
4 the policy that you can't retake the
5 exam, then you would have evidence of
6 irregular behavior.

7 BY MR. THRONSON:

8 Q. How about giving a false name on
9 an application, would you agree that in
10 applying for ECFMG certification in 1996 that
11 an individual identified himself as John Nosa
12 Akoda and that's a false name?

13 MS. McENROE: Objection to form.

14 THE WITNESS: Someone applied to
15 ECFMG in 1996 and used the name John Nosa
16 Akoda, and based on the facts that were
17 stipulated in plea bargain Igberase has
18 stated that he used John Nosa Akoda's
19 name.

20 BY MR. THRONSON:

21 Q. It appears that Kelly suspected
22 in 2000 that Akoda and Igberase were the same
23 person, right?

24 A. Yes. He, I think, had a

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1 residency program presumably on his
2 merits, his own merits, and we would have
3 verified it, as we do with all residency
4 programs.

5 What his certification status
6 was, which was true at the time that we
7 verified it to them, he had a certificate
8 that was issued to him in that name, and
9 it was valid.

10 BY MR. THRONSON:

11 Q. That was information that -- the
12 certification information that ECFMG supplied,
13 that was one of the pieces of information that
14 Howard University had before when determining
15 whether to accept this person into its
16 residency program, correct?

17 MS. McENROE: Objection to form.

18 THE WITNESS: Yes. They would
19 have received a status report through the
20 regular residency application process.

21 BY MR. THRONSON:

22 Q. The same is true for the
23 Maryland Board of Physicians, in determining
24 whether to grant Igberase, Akoda a license to

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1 practice medicine it would have had before it
2 information supplied by ECFMG regarding his
3 ECFMG certification status?

4 A. Yes.

5 Q. The same is true for Prince
6 George's County Hospital?

7 A. Yes. I believe they requested a
8 verification of his certification status.

9 Q. Did ECFMG ever tell anyone
10 outside of the organization of the suspicion of
11 at least one of it's staff members, perhaps
12 more, that Igberase and Akoda were the same
13 person, before the law enforcement
14 investigation?

15 A. Before the law enforcement, not
16 that I'm aware of. I don't think it would have
17 necessarily been appropriate for them to do
18 that if we didn't feel that we had evidence
19 that they were the same person, because we
20 could potentially be providing information that
21 was not substantiated that may have an impact
22 on a physician's career or on residency
23 program.

24 Q. Did ECFMG ever notify anyone

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1 outside of the organization, before the law
2 enforcement investigation, that Jersey Shore
3 had dismissed him from their residency program?

4 A. Not that I'm aware of.

5 Q. Why not?

6 A. Why didn't we tell anyone about
7 a potential suspicion?

8 Q. Why didn't you tell anyone that
9 he had been dismissed from his residency
10 program among other things, providing --

11 A. That kind of information, that's
12 not within our scope or responsibility to
13 report loss of residency, I assume. Well,
14 maybe not loss, but residents are dismissed
15 from their programs for a variety of reasons.
16 Unless they are a J-1, which he was not, we
17 don't get that kind of information or keep it
18 on a regular basis, and it's not in our scope
19 to report that to other organizations.

20 Q. If this same set of facts came
21 before ECFMG today, came before your
22 department, would you handle it the same way?

23 MS. McENROE: Objection to form;
24 calls for speculation.

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1 person?

2 MS. McENROE: Objection to form.

3 THE WITNESS: What other
4 information would we have expected?

5 MR. THRONSON: Yeah.

6 THE WITNESS: I don't know. It
7 could be anything.

8 BY MR. THRONSON:

9 Q. Is there any organization that
10 is better situated than ECFMG to determine
11 whether the applicant, who identified himself
12 as Igberase Charles, and the applicant who
13 identified himself as Akoda, were in fact the
14 same applicant?

15 MS. McENROE: Objection to form.

16 THE WITNESS: So the
17 verification of the identity of someone
18 who is showing up at the residency
19 program would be on the residency program
20 or the hospital, would be my assumption.

21 If they are hiring the
22 individual, they're not relying on ECFMG
23 to say that we identified -- that they
24 don't have to do their own review of who

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1 that person; is that what you're asking?

2 BY MR. THRONSON:

3 Q. Who is better situated? Are you
4 saying the hospitals are in a better
5 position to answer -- strike that.

6 Were the hospitals in this case
7 in a better position to answer whether Igberase
8 and Akoda are the same person; are you
9 contending they were?

10 MS. McENROE: Objection to form.

11 THE WITNESS: What I'm saying
12 is, each organization has its own process
13 to verify identities or certification of
14 identities.

15 We would not -- those processes
16 would differ. We are not hiring the
17 person so whatever the requirements would
18 be for identity, for VISA status, for any
19 of those things, it wouldn't be
20 appropriate for us to check those because
21 it's not within our scope of the
22 certification program.

23 For example, other than the J-1
24 visas we sponsor, we don't confirm to

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1 residency programs that those individuals
2 have the appropriate visas to be in the
3 United States.

4 It is the responsibility of the
5 individual and then the organization
6 that's hiring them to do that kind of
7 identification and review of the
8 individual.

9 I don't know that one is in a
10 better position than the other. It's
11 just that each organization has different
12 processes and ways to certify identities
13 and records.

14 BY MR. THRONSON:

15 Q. So is it your contention, that
16 it would have been inappropriate for ECFMG to
17 do further investigation into this question of
18 identity, to determine whether Igberase and
19 Akoda are the same person?

20 MS. McENROE: Objection to form.

21 MR. THRONSON: Are you saying
22 that would have been inappropriate?

23 MS. McENROE: Objection to form.

24 THE WITNESS: I wouldn't use the

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1 word inappropriate, but it wasn't part of
2 our process to go further or to see if
3 some -- I don't know what other
4 organization we could have gone to at the
5 time to see if the two people were the
6 same; if that's what you are asking.

7 BY MR. THRONSON:

8 Q. Could you have consulted with
9 someone from the Nigeria Consulate to determine
10 if the passport was authentic from their
11 perspective?

12 MS. McENROE: Objection to form.

13 THE WITNESS: I suppose we could
14 have, but that wasn't part of our process
15 at the time.

16 BY MR. THRONSON:

17 Q. Could you have called any of the
18 references that Akoda gave to determine whether
19 the letters of recommendation were authentic?

20 MS. McENROE: Objection to form.

21 THE WITNESS: We could have, and
22 we may have. I just don't have any
23 documentation in the file that we made
24 the phone calls.

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1 BY MR. THRONSON:

2 Q. Obviously you could have
3 compared the photos between the two
4 applications to see if they resemble each
5 other?

6 MS. McENROE: Objection to form.

7 THE WITNESS: Yes, we could. We
8 did when we reviewed the file. We would
9 have looked at both photographs when we
10 reviewed the file in 2000 in the
11 investigation, but again we would -- the
12 photos could be -- they could look like
13 each other, but I look like my cousin,
14 right, so they are not definitive in and
15 of themselves to say they are the same
16 person.

17 We are not expert in being able
18 to do that between two photographs.

19 BY MR. THRONSON:

20 Q. So you're saying that, ECFMG did
21 look through both applications; the
22 applications that Igberase Charles submitted
23 and the applications that Akoda submitted?

24 A. In 2000 --

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1 Igberase's information.

2 Q. You were asked some questions a
3 little bit earlier today regarding whether and
4 when Dr. Akoda responded to the letter from
5 Mr. Kelly dated August 22, 2000. Do you recall
6 that?

7 A. Yes.

8 Q. Does this refresh your
9 recollection for that testimony?

10 A. Yes. So I think I said that he
11 had not responded within the requisite 15 days,
12 but looking at the receipt date on this it
13 appears that he did.

14 Q. There was some discussion
15 earlier today about what it means to have a
16 finding of irregular behavior for false
17 information on an application. Do you remember
18 generally that kind of testimony?

19 A. Yes.

20 Q. Can you clarify what could
21 constitute irregular behavior for false
22 information on an application to ECFMG?

23 A. False information on an
24 application for ECFMG would, could consist of

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1 indicating to ECFMG that you had not taken an
2 exam previously when you had taken an exam.

3 It could also refer to your
4 medical school attendance and graduation if
5 when we sourced verified your diploma, it was
6 inauthentic.

7 Q. Could an inaccurate address be
8 considered by ECFMG to be false information
9 that would constitute irregular behavior?

10 A. That is not something that we
11 would consider irregular behavior.

12 Q. What about the location of the
13 birth?

14 A. No.

15 Q. What about social security
16 number?

17 A. No.

18 Q. Is it possible for there to be
19 information that is false on an ECFMG
20 application that might constitute a violation
21 of law, but would not constitute a basis for
22 irregular behavior for ECFMG?

23 A. Yes, that's possible.

24 Q. Does ECFMG make allegations of

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1 irregular behavior for applicants' violations
2 of law just because they are a violation of
3 law? So for example, rape or murder?

4 A. No. The criminal activities of
5 applicants are not within our jurisdiction for
6 irregular behavior.

7 Q. There was a lot of discussion
8 today about ECFMG certification, correct?

9 A. Yes.

10 Q. What does an ECFMG certificate
11 signify?

12 A. An ECFMG certificate signifies,
13 that the individual has met minimum
14 requirements which includes passing medical
15 licensing examinations, as well as meeting our
16 credentialing requirements.

17 It signifies to an ACGME
18 accredited residency program that the
19 individual has met those requirements for
20 admission to GME, and it is part of the
21 requirements for eligibility for Step 3 and for
22 licensure.

23 Q. Does an ECFMG certificate
24 signify certification of an applicant's

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1 identity to a recipient of a ECFMG status
2 report indicating there's an ECFMG certificate
3 in place?

4 A. No.

5 Q. What do you mean by that?

6 A. So when we certify the status of
7 an ECFMG certificate, we are not certifying to
8 the organization necessarily the identity of
9 the individual, but that an individual with
10 that name and date of birth has met the
11 requirements for certification and what the
12 validity is of their certificate and where they
13 went to medical school.

14 Q. Is ECFMG certifying to the
15 recipients of the ECFMG certification
16 information that the applicant's social
17 security number is accurate?

18 A. No.

19 Q. Is ECFMG certifying to the
20 recipient of the ECFMG certification that the
21 location of the birth is accurate?

22 A. No.

23 Q. Is ECFMG certifying to the
24 recipients of the ECFMG certification status

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1 that the clinical clerkships are accurate as
2 represented on ECFMG's application?

3 A. No.

4 Q. Is it ECFMG's expectations that
5 individuals from the public rely on ECFMG
6 certification for any purpose?

7 A. I'm sorry, can you say that
8 again?

9 Q. Yes. Is it ECFMG's expectation
10 that individuals from the public rely on ECFMG
11 status for any purpose?

12 A. No.

13 Q. So can an individual off the
14 street or who is examining the credentials of a
15 potential physician they want to go see, are
16 they entitled to contact ECFMG and ask about a
17 physician's certification status?

18 A. No. We would not release a
19 physician's certification status or a status
20 report to a member of the public.

21 Q. Would ECFMG release a
22 certification status report to the individual
23 himself?

24 A. No.

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1 Q. To whom would ECFMG release a
2 ECFMG certification status report?

3 A. To residency programs, licensing
4 boards, and other organizations that are
5 employing the physician as a physician.

6 Q. Like hospitals and --

7 A. Hospitals, right, CVOs that are
8 working on behalf of the hospitals.

9 Q. Is it ECFMG's expectation that
10 recipients of ECFMG certification get
11 additional credentials before laying hands on
12 patients independently? I can restate that if
13 you need?

14 A. Yes, can you.

15 Q. Yes. So what I'm asking is
16 there was a lot of questions today about
17 whether an ECFMG certificate was necessary for
18 an applicant to do other things, for example go
19 to a residency program. Do you remember that
20 testimony?

21 A. Yes.

22 Q. Is it ECFMG's understanding that
23 an ECFMG certificate is sufficient for an
24 applicant to treat patients?

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1 A. No, it's not sufficient.

2 Q. What else would be required
3 under ECFMG's expectations?

4 A. So ECFMG certification is one of
5 the initial steps in the process for an
6 international medical graduate to ultimately
7 practice medicine in the United States.

8 While ECFMG certification may be
9 required for entrance into residency or for
10 licensure, it is not the only requirement that
11 the residency programs and the licensing boards
12 have in order to admit those individuals to
13 their programs or to license those individuals.

14 Q. So to make sure I understand.
15 After an applicant gets an ECFMG certificate,
16 do they take any other board exams?

17 A. Yes. They need to take USMLE
18 Step 3. So essentially they have to become
19 ECFMG certified which is the beginning of the
20 process, taking the examinations required for
21 certification; have their credentials source
22 verified; go through the residency application
23 process; get accepted to a residency program,
24 and meet whatever requirements the residency

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1 programs has.

2 They can then apply for Step 3,
3 and they have to be certified and meet the
4 eligibility requirements that the Federation of
5 State Medical Boards has for Step 3; complete
6 their training and then again meet whatever
7 requirements the licensing board would have on
8 them to be licensed.

9 Q. You said "complete training,"
10 what do you mean by that?

11 A. Graduate medical education
12 training is generally a requirement for
13 licensure in all states.

14 Q. So in other words, would that be
15 like a residency program, for example?

16 A. Yes, residency program.

17 Q. So are the applicants coming
18 through ECFMG still in graduate medical
19 education as they are proceeding forward; do
20 they still have more education requirements
21 after they get an ECFMG certificate?

22 A. To be licensed in the U.S., yes.

23 Q. Is -- FSMB, that's an acronym
24 you just used, what does that stand for?

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1 A. That is the Federation of State
2 Medical Boards.

3 Q. Is that an entity under ECFMG's
4 control?

5 A. No.

6 Q. That's a separate entity?

7 A. Yes.

8 Q. Thank you.

9 I have no further questions of
10 this witness.

11 MR. THRONSON: Just a few follow
12 ups to echo a few of Counsel's questions.

13 - - -

14 REDIRECT EXAMINATION

15 - - -

16 BY MR. THRONSON:

17 Q. Is it ECFMG's expectation that
18 state medical boards will rely on reports of
19 ECFMG certification status for any purpose?

20 A. Yes. To meet the requirement
21 that the board might have for ECFMG
22 certification.

23 Q. Is it ECFMG's expectation that
24 residency programs, such as that at Howard

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1 University, would rely on ECFMG status for any
2 purpose?

3 A. Yes, to demarcate that that
4 person met the certification so they could
5 enter GME among whatever other requirements the
6 program had.

7 Q. It is ECFMG's expectation that
8 hospitals that are considering whether to grant
9 clinical privileges to a physician rely on
10 ECFMG status for any purpose?

11 A. I think it would be fair to say
12 that they have the same expectation as the
13 licensing board and the residency programs have
14 on the status reports; on ECFMG providing
15 information about certificate status.

16 Q. The status report that was
17 provided to the Howard residency program
18 regarding Akoda, what was all the information
19 that that status report contained?

20 A. The status report would contain,
21 his name; his USMLE identification number; his
22 medical school; the year he graduated; the
23 country of medical school; the validity of his
24 ECFMG certificate, what the status is; whether

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1 it expired or valid indefinitely; and when it
2 was issued.

3 Q. If there were any finding of
4 irregular behavior, would the status report
5 contain an annotation reflecting that finding?

6 A. Yes.

7 Q. Any other information that the
8 status report contains, in that was submitted
9 to the Howard Residency Program?

10 A. The status report to the
11 residency program may have had the dates that
12 he passed the USMLE examinations; and that
13 would be for the exams that met ECFMG's
14 examination requirement, but we would not
15 include scores to the residency program because
16 they would get those through a USMLE
17 transcript.

18 Q. Any other information?

19 A. No, electronically through the
20 system I don't believe there's any other
21 information.

22 Q. ECFMG also provided status
23 reports to the Maryland Board -- a status
24 report to the Maryland Board of Physicians,

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1 right?

2 A. Yes.

3 Q. Would that status report have
4 contained all the information that you just
5 mentioned?

6 A. Yes.

7 Q. Would it have been the same
8 status report that was sent to them?

9 A. It would have been the same
10 status report, yes. In terms of the
11 information that is on it, it's in a different
12 format. When Howard gets it electronically,
13 it's not a PDF it's data; and when the Maryland
14 board gets it, it would be in more of a PDF
15 format --

16 Q. Okay.

17 A. -- the substance is the same.

18 Q. Any additional information that
19 was on the report to the Maryland Board of
20 Physicians?

21 A. Other than, our -- we have some
22 disclaimers at the bottom, but other than that
23 there's no other information that I recall.

24 Q. What are the disclaimers?